



CRY/jbl

February 2019

Dear Parent/Carer,

## SUMMER SPORTS CAMP

We are writing to invite your child to attend The Boswells School 2019 Summer Sports Camp. This will be the 13<sup>th</sup> year in a row we have run the camp and the aim is to provide an enjoyable week of sporting activities to students in Years 5 & 6 who have a keen interest in sport. During the week the pupils will participate in numerous sporting activities such as Football, Netball (Girls), Rugby (Boys), Volleyball, Basketball and Water Polo, amongst others.

The Summer Sports Camp will run from Monday 29<sup>th</sup> July to Friday 2<sup>nd</sup> August 2019 from 9.00am – 3.00pm each day. Activities will take place in The Boswells School Sports Hall, Swimming Pool, Gymnasium, Netball Courts and Playing Fields. Your child will spend the week being taught by Boswells' PE staff. They will learn new techniques and skills in various sports, and how to transfer those skills into game situations. On the final day there will be a mini tournament in each sport with certificates for teams and individuals. This is an exciting opportunity for your child to meet the school PE staff, become familiar with the school itself and to socialise with their peers.

The requirements for participation in the week are outlined below:

- Arrive punctually for 8.45am
- Wear clothing suitable for sporting activities.
- Jewellery removed.
- The participants will be expected to bring a packed lunch for each day plus sufficient fluids to keep them hydrated considering the physical demands of the day.
- Exemplary behaviour.
- Enthusiasm for fun!

The cost of the week inclusive of coaching, certificates and a Boswells' white polo shirt will be £100.00. However, if your child is unable to attend for the whole week we are offering a daily rate of £25.00; the first day booked will include a T Shirt. Cheques are preferred and should be made payable to 'The Boswells School'. Please be aware that payments are non-refundable unless we have been given sufficient notice to try and find a suitable replacement.

We are sure your child will benefit enormously from the experience. Not only will it allow them to develop their sporting skills but they will also experience some aspects of life at The Boswells School and it is hoped that strong friendships will be forged throughout the week.

Please complete the attached reply slip if you would like your child to participate in the Summer Sports Camp. Reply slips, along with payment, can be posted to the school or handed in at the school's Reception. The deadline for payment is Monday 3<sup>rd</sup> June 2019. After this date, if we have not heard from you we will assume you do not wish your child to attend.

We look forward to hearing from you and working with your child. If you have any questions relating to the Summer Sports Camp please do not hesitate to contact Mr Ridgway at [cry@boswells-school.com](mailto:cry@boswells-school.com).

Yours faithfully

Mr C Ridgway  
**Teacher of Sport and PE / Camp Organiser**

Mr S Mansell  
**Head of School**

To: **The Finance Office, The Boswells School, Burnham Road, Chelmsford. CM1 6LY**

Name of Child: \_\_\_\_\_ (Male / Female) please indicate

Primary School: \_\_\_\_\_ (Year 5 / Year 6) please indicate

I have received your letter regarding the Summer Sports Camp to be held at The Boswells School from Monday 29<sup>th</sup> July to Friday 2<sup>nd</sup> August 2019, and have read and accept the information given in the letter.

**Please circle one of the two options below:**

My child will be attending all week; I enclose cash/cheque for £100.00

**\*\*\* or \*\*\***

I enclose cash/cheque for £\_\_\_\_\_ (£25.00 per day)

My child will be attending on Monday \_\_\_\_ Tuesday \_\_\_\_ Wednesday \_\_\_\_ Thursday \_\_\_\_ Friday \_\_\_\_  
(\*please tick as applicable)

I would like the following chest size for the Boswells' Summer Camp Polo shirt: *(please circle as appropriate)*

Age 7-8 (28")

Age 9-10 (30")

Age 11-12 (32")

Age 13 (34")

Small Adults

Contact details for the week of the Summer Sports Camp (please give 2):

Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Medical information:

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Email Address to which you wish all further correspondence to be sent: **(must be provided)**

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Signature: \_\_\_\_\_  
(Parent/Carer)